

CHEMICAL COMPANY

90 MALTESE DRIVE - TOTOWA, NEW JERSEY 07512
(201) 256-7777 - FAX: (201) 256-6458

October 16, 1995

Mr. Joseph Cosentino, OSC
Removal Action Branch
Emergency and Remedial Response Div.
U.S. Environmental Protection Agency, Region II
2890 Woodbridge Ave.
Edison, New Jersey 08837

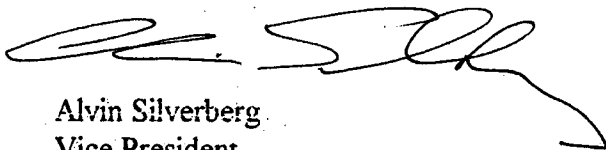
Subject: Bayonne Barrel and Drum Superfund Site

Dear Sir:

I have attached the response to your letter regarding the Bayonne Barrel and Drum Superfund Site.

If we can be of help in any way, please contact us.

H & N CHEMICAL COMPANY



Alvin Silverberg
Vice President

AS/ds

cc: w/enc. Bell Environmental
Eric Rothenberg, Morgan Lewis & Bockius
Mark Seidenberg, Esq.
Office of Regional Counsel
U.S. Environmental Protection Agency, Region II
290 Broadway 17th Floor
New York, NY 10007

466916



Request for Information

1. a. H & N Chemical Company Federal Tax ID # 22-1994514

b. Corporation

c. Herbert Wolfson

C/O H & N Chemical Company
90 Maltese Drive
Totowa, NJ 07512

d. Not applicable

e. Not applicable

f. Not applicable

2. a. Not to the best of our knowledge.

b. Not applicable as H & N Chemical (Federal Tax # 22-1994514) did not have a relationship with Bayonne Barrel and Drum.

3. None

4. None

5. None have been provided as H & N Chemical (Federal Tax # 22-1994514) did not have a relationship with Bayonne Barrel and Drum.

6. None

7. Not applicable

CERTIFICATION OF ANSWERS TO REQUEST FOR INFORMATION

State of New Jersey
County of Passaic

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document (response to EPA Request for Information) and all documents submitted herewith, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete, and that all documents submitted herewith are complete and authentic unless otherwise indicated. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

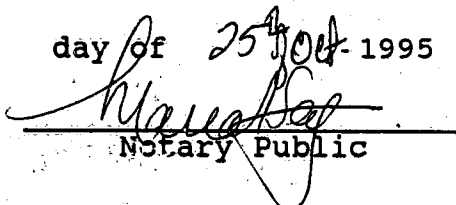
Alvin Silverberg
NAME (print or type)

Vice President
TITLE (print or type)


SIGNATURE

Sworn to me before this

day of 25th Oct 1995


Notary Public

MARIA SAGUI
A NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES JAN. 6, 1998



CHEMICAL COMPANY

90 MALTESE DRIVE · TOTOWA, NEW JERSEY 07512

FedEx
Federal Express

USE THIS AIRBILL FOR SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO AND ALL NON U.S. LOCATIONS.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL
PACKAGE
TRACKING NUMBER

3934762694

4364N

3934762694



SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER

Date

0071-8308-9

10/25/95

From (Your Name) Please Print

Al Silverberg

Your Phone Number (Very Important)

201-256-7777

To (Recipient's Name) Please Print

Mr. Joseph Cosentino, OSC

Recipient's Phone Number (Very Important)

Company

H & N CHEMICAL CO

Department/Floor No.

Company

Emergency and Remedial Response Div.

Department/Floor No.

Street Address

90 MALTESE DR

U.S. Environmental Protection Agency Region I

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.)

2890 Woodbridge Ave

City

TOTOWA

State

NJ

ZIP Required

07512

City

Edison

State

NJ

ZIP Required

08837

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.)

IF HOLD AT FEDEX LOCATION, Print FEDEX Address Here

Street
Address

PAYMENT 1

☒ Bill Sender 2 ☐ Bill Recipient's FedEx Acct. No.

3 ☐ Bill 3rd Party FedEx Acct. No.

4 ☐ Bill Credit Card

5 ☐ Cash

☒ Check Acct. No. Req'd. Fill in Account Number below

Fill in Account Number below (req'd.)

Fill in Credit Card No. below (req'd.)

Exp.

Date

City

State

ZIP Required

SERVICES

(Check only one box)

DELIVERY AND SPECIAL HANDLING

(Check services required)

PACKAGES

WEIGHT

In Pounds
Only

Priority Overnight

(Delivery by next business morning)

Standard Overnight

(Delivery by next business afternoon,
No Saturday delivery)

11 ☐ OTHER PACKAGING

51 ☐ OTHER PACKAGING

16 ☒ FEDEX LETTER*

56 ☒ FEDEX LETTER*

12 ☐ FEDEX PAK*

52 ☐ FEDEX PAK*

13 ☐ FEDEX BOX

53 ☐ FEDEX BOX

14 ☐ FEDEX TUBE

54 ☐ FEDEX TUBE

30 ☐ ECONOMY*

46 ☐ GOVT LETTER

* Economy Letter Rate not available.
Minimum charge.

41 ☐ GOVT PACKAGE

One pound Economy rate.

Freight Service

(For packages over 150 lbs.)

70 ☐ OVERNIGHT FREIGHT**

80 ☐ TWO-DAY FREIGHT**

(Confirmed reservation required)

**Declared Value Limit \$500.
*Call for delivery schedule.

Weekday Service

1 ☐ HOLD AT FEDEX LOCATION WEEKDAY

(Fill in Section H)

2 ☒ DELIVER WEEKDAY

Saturday Service

31 ☐ HOLD AT FEDEX LOCATION SATURDAY

(Fill in Section H)

3 ☐ DELIVER SATURDAY

(Extra charge) (Not available
to all locations)

9 ☐ SATURDAY PICK-UP

Special Handling

4 ☐ DANGEROUS GOODS (Extra charge)

6 ☐ DRY ICE

Dangerous Goods Shipper's Declaration not required

Dry Ice, 8 Lb (184), X kg, 904 Lb

DESCRIPTION

12 ☐ HOLIDAY DELIVERY (if offered)

(Extra charge)

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

1

Total

Emp. No.

Date

Federal Express Use

☐ Cash Received

☐ Return Shipment

☐ Third Party

☐ Chg. To Del.

☐ Chg. To Hold

Base Charges

Declared Value Charge

Other 1

Other 2

Total Charges

Street Address

City

State

Zip

Received By:

X

Date/Time Received

FedEx Employee Number

REVISION DATE 4/94

PART #145412

WCSC 1194C

FORMAT #160

160

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PRINTED

U.S.A.

Release Signature

1 ☐ Regular Stop

2 ☒ n-Call Stop

3 ☐ Drop Box

4 ☐ B.S.C.

5 ☐ Station

6 ☐ Station

7 ☐ Station

8 ☐ Station

9 ☐ Station

10 ☐ Station

11 ☐ Station

12 ☐ Station

4364N

3934762694

Date
10/25/95



From (Your Name) Please Print Al Silverberg		Your Phone Number (Very Important) (201)-256-7777		To (Recipient's Name) Please Print Mr. Joseph Cosentino, OSC		Recipient's Phone Number (Very Important) ()	
Company H & N CHEMICAL CO		Department/Floor No.		Company Emergency and Remedial Response Div.		Department/Floor No.	
Street Address 90 MALTESE DR				Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.) 2890 Woodbridge Ave			
City TOTOWA		State NJ		City Edison		State NJ	
ZIP Required 07512		ZIP Required 08837					

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on Invoice.)



IF HOLD AT FEDEX LOCATION, Print FEDEX Address Here
Street Address

PAYMENT 1 <input type="checkbox"/> Bill Sender 2 <input type="checkbox"/> Bill Recipient's FedEx Acct. No. 3 <input type="checkbox"/> Bill 3rd Party FedEx Acct. No. 4 <input type="checkbox"/> Bill Credit Card				City		State		ZIP Required	
5 <input type="checkbox"/> Cash 6 <input type="checkbox"/> Check									

SERVICES (Check only one box)		DELIVERY AND SPECIAL HANDLING (Check services required)		PACKAGES	WEIGHT In Pounds Only	YOUR DECLARED VALUE (See right)	Emp. No.	Date	Federal Express Use
Priority Overnight (Delivery by next business morning) 11 <input type="checkbox"/> OTHER PACKAGING 16 <input checked="" type="checkbox"/> FEDEX LETTER 12 <input type="checkbox"/> FEDEX PAK* 13 <input type="checkbox"/> FEDEX BOX 14 <input type="checkbox"/> FEDEX TUBE	Standard Overnight (Delivery by next business afternoon. No Saturday delivery) 51 <input type="checkbox"/> OTHER PACKAGING 56 <input checked="" type="checkbox"/> FEDEX LETTER* 52 <input type="checkbox"/> FEDEX PAK* 53 <input type="checkbox"/> FEDEX BOX 54 <input type="checkbox"/> FEDEX TUBE	Weekday Service 1 <input type="checkbox"/> HOLD AT FEDEX LOCATION WEEKDAY (Fill in Section H) 2 <input checked="" type="checkbox"/> DELIVER WEEKDAY Saturday Service 31 <input type="checkbox"/> HOLD AT FEDEX LOCATION SATURDAY (Fill in Section H) 3 <input type="checkbox"/> DELIVER SATURDAY (Extra charge) (Not available to all locations) 9 <input type="checkbox"/> SATURDAY PICK-UP (Extra charge)	Special Handling 4 <input type="checkbox"/> DANGEROUS GOODS (Extra charge) 6 <input type="checkbox"/> DRY ICE Dangerous Goods Shipper's Declaration not required Freight Service (For packages over 150 lbs.) 70 <input type="checkbox"/> OVERNIGHT FREIGHT** 80 <input type="checkbox"/> TWO-DAY FREIGHT** (Confirmed reservation required) * Delivery commitment may be later in some areas. ** Declared Value Limit \$500. *** Call for delivery schedule.	1 Total 1	Total Total	Total Total	<input type="checkbox"/> Cash Received <input type="checkbox"/> Return Shipment <input type="checkbox"/> Third Party <input type="checkbox"/> Chg. To Del. <input type="checkbox"/> Chg. To Hold Street Address City State Zip Received By: X Date/Time Received FedEx Employee Number	Base Charges Declared Value Charge Other 1 Other 2 Total Charges REVISION DATE 4/94 PART #145412 WCSL 11940 FORMAT #160 160 © 1993-94 FEDEX PRINTED IN U.S.A.	